IOWA DEPARTMENT OF HUMAN SERVICES

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> * * * * * A V E R A G E S * * * * * * * COST PER COST PER UNITS PER COST PER

TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE)

(MONTHLY	TOTALS	AS OF	10/31/10)
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					COST PER		IIS PEK	COST PER
CATEGORY OF SERVICE	RECIPIENTS		UNITS OF	TOTAL	UNIT OF	ELIGIBLE R		RECIPIENT
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT	SERVED	SERVED
INPATIENT	6,571	6,757	37,908	\$31,295,691.40	\$825.57	\$68.59	5.8	\$4,762.70
OUTPATIENT	65,259	95,591	1,278,884	\$19,271,565.54	\$15.07	\$42.24	19.6	\$295.31
CHILD PART HOSP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ADULT PART HOSP	1	0	0	\$23,757.42	\$0.00	\$0.10	.0	\$23,757.42
ADULT DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
SKILLED NURSING FACILITY	980	1,096	13,915	\$2,412,824.59	\$173.40	\$5.29	14.2	\$2,462.07
INTERMEDIATE CARE FACILITY	11,791	12,225	346,503	\$41,272,677.26	\$119.11	\$90.46	29.4	\$3,500.35
INTER CARE MENTAL RETARDA	1,786	1,791	52,676	\$18,398,873.52	\$349.28	\$40.33	29.5	\$10,301.72
NURSING FAC FOR MENTAL ILL	24	24	692	\$142,383.38	\$205.76	\$0.61	28.8	\$5,932.64
HOME HEALTH	13,363	16,872	328,850	\$10,873,443.07	\$33.07	\$23.83	24.6	\$813.70
LEAD INSPECTION AGENCY	8	9	9	\$3,202.36	\$355.82	\$0.01	1.1	\$400.30
PHYSICIAN	126,265	256,530	357,075	\$16,039,013.26	\$44.92	\$35.15	2.8	\$127.03
CLINIC SERVICES	21,204	28,913	25,448	\$3,784,923.09	\$148.73	\$8.30	1.2	\$178.50
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
LAB AND RADIOLOGICAL	15,182	21,398	33,572	\$662,779.33	\$19.74	\$1.45	2.2	\$43.66
HABILITATION SERVICES	3,399	5,867	104,394	\$4,551,485.95	\$43.60	\$9.98	30.7	\$1,339.07
REMEDIAL SERVICES	10,132	15,576	324,480	\$4,978,155.43	\$15.34	\$10.91	32.0	\$491.33
REHAB SUPPORT SERVICES	0	0	021,100	\$0.00	\$0.00	\$0.00	.0	\$0.00
AMBULANCE SERVICES	2,259	2,589	2,568	\$302,802.59	\$117.91	\$0.66	1.1	\$134.04
LOCAL EDUCATION AGENCY	654	1,236	124,774	\$1,202,507.42	\$9.64	\$2.64	190.8	\$1,838.70
EARLY ACCESS SERVICES	109	145	209	\$2,293.88	\$10.98	\$0.01	1.9	\$21.04
PRESCRIBED DRUGS	132,875	396,236	353,653	\$19,320,435.75	\$54.63	\$42.34	2.7	\$145.40
DRUG CAPITATION	132,073	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
NEMT SERVICES	361,690	361,691	361,509	\$773,629.26	\$2.14	\$1.70	1.0	\$2.14
INDIAN HEALTH SERVICES	13	14	14	\$4,046.00	\$289.00	\$0.01	1.1	\$311.23
FAMILY PLANNING SERVICES	7,326	8,139	8,168	\$764,375.81	\$93.58	\$1.68	1.1	\$104.34
IOWA PLAN PROGRAM	361,980			·	\$27.91	\$24.01	1.1	\$30.27
MANAGED SUBSTANCE ABUSE	•	392,723	392,469	\$10,955,353.20	\$0.00			\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00 \$0.00		\$0.00	.0	
		0	0		\$0.00 \$159.40	\$0.00	.0	\$0.00
EPSDT SCREENING	5,948	6,431	6,366	\$1,014,728.70		\$4.02	1.1	\$170.60
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	82	85	82	\$240,020.00	\$2,927.07	\$0.53	1.0	\$2,927.07
PATIENT MANAGEMENT	171,290	171,290	171,290	\$342,578.00	\$2.00	\$34.27	1.0	\$2.00
HEALTH INS PREMIUM PAYMENT	3,405	7,835	7,835	\$450,894.57	\$57.55	\$0.99	2.3	\$132.42
MEDICAL SUPPLIES	23,934		1,834,708	\$3,872,042.60	\$2.11	\$8.49	76.7	\$161.78
OTHER PRACTITIONER	15,475	23,446	64,781	\$2,109,149.22	\$32.56	\$4.62	4.2	\$136.29
FAMILY CENTERED PROGRAM	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PRESERVATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
GROUP TREATMENT THERAPY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
DENTAL	29,449	36,220	36,591	\$5,268,569.46	\$143.99	\$11.55	1.2	\$178.90
OPTOMETRIST	12,663	14,938	15,844	\$861,363.56	\$54.37	\$1.89	1.3	\$68.02
CHIROPRACTIC	9,039	15,883	19,469	\$486,572.72	\$24.99	\$1.07	2.2	\$53.83
PODIATRIC	4,224	5,138	6,770	\$195,548.32	\$28.88	\$0.43	1.6	\$46.29
PHYSICAL DISABILITIES SVCS	723	989	29,098	\$359,745.97	\$12.36	\$0.79	40.2	\$497.57
BRAIN INJ WAIVER SERVICES	1,018	2,323	55,803	\$1,934,523.14	\$34.67	\$4.24	54.8	\$1,900.32
PSYCHIATRIC	3,428	5,107	5,731	\$434,699.37	\$75.85	\$0.95	1.7	\$126.81
RESIDENTIAL CARE FACILITY	1,571	2,030	57,658	\$433,786.00	\$7.52	\$0.95	36.7	\$276.12

IAMM2200-R002 (MR-0-12) AS OF 10/31/10

IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

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(BY CATEGORY OF SERVICE)

(MONTHLY TOTALS AS OF 10/31/10)

					* * * * * COST PER	AVERAGE COST PER UN	E S * * * NITS PER	* * * * COST PER
CATEGORY OF SERVICE	RECIPIENTS NUMBER OF		UNITS OF	TOTAL	UNIT OF		RECIPIENT	RECIPIENT
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT	SERVED	SERVED
ID WAIVER SERVICE	10,261	19,891	705,996	\$27,730,003.99	\$39.28	\$2,581.46	68.8	\$2,702.47
CHILDRENS MENTAL HEALTH SVC	559	773	31,270	\$524,134.57	\$16.76	\$736.14	55.9	\$937.63
AIDS WAIVER SERVICES	41	73	3,498	\$36,997.00	\$10.58	\$822.16	85.3	\$902.37
ELDERLY WAIVER SERVICES	9,525	28,146	459,873	\$6,175,544.24	\$13.43	\$638.56	48.3	\$648.35
ILL & HANDICAPPED WAIVER SVCS	2,040	3,051	98,405	\$1,566,908.85	\$15.92	\$627.77	48.2	\$768.09
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	10,623	15,724	121,849	\$3,974,530.48	\$32.62	\$8.71	11.5	\$374.14
UNASSIGNED	16	0	0	\$720,311.55-	\$0.00	\$1.58-	0	\$45,019.47-
* ALL CATEGORIES *	400,954 /	2,024,416	7,880,687	\$244,328,248.72	\$31.00	\$535.50	19.7	\$609.37
		*	*** END OF F	REPORT ***				